Approved for use through 7/81/2008. OMB 0651-0622
U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Papetwork Reduction Act of 1995, no persons ets regulated to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-876 00A APPLICATION AS FILED - PART I OTHER THAN SMALL ENTITY (Column 1) (Column 2) SMALL ENTITY OR FOR NUMBER FILED : NUMBER EXTRA BASIO FEE (87 OFR 1.16(a), (b), or (d)) RATE (\$) FEE (\$) RATE (\$) FEE (\$) SEARCH FEE (87 OFR 1.(60), (1), or (m)) EXAMINATION FEE (87 OFR 1.16(a), (p), or (q)) TOTAL CLAIMS (87 CFR 1.18(1)) minus 20 ≈ 25. x x 57 INDEPENDENT CLAIMS (87 CFR 1.16(N)) **OR** Ė. x 108 a 8 sunkm x Jou. If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$126 for small entity) for each (37 CFR 1.16(a)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.160) 180 (ED) If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Cólumn 1) (Column 2) (Column 3) OTHER THAN SMALL ENTITY OŘ CLAIMS SMALL ENTITY HIGHEST REMAINING NUMBER PŘESENT ENTAN RATE (\$) AFTER AMENDME ADDI: **PREVIOUS** RATE (\$) EXTRA ADDI-TIONAL FEE (\$) PAID FOR TIONAL Total Minus FEE (\$) (37 CFR 1.16(1) Minus OR Independent (37 CFR 1.16(h)) 200 Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (57 CFR 1.16(1)) 80 360 OR TOTAL ADD'L FEE TOTAL ADD'L FEE OR (Column 1) (Column 9) (Column 2) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (\$) AFTER AMENDMENT ADDI-RATE (\$) PREVIOUSLY EXTRA ADDI-TIONAL FEE (\$) PAID FOR TIONAL Total (13 CFR 1.46(1) Minus FEE (\$) Independent (37 OFR 1.16(h)) OR Minus 8 ٠X٠ Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1)) OR TOTAL ADD'L FEE TOTAL OR

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

** If the Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the included case. Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

**DORRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.